WHEREAS, Nurse practitioner and physician assistant programs with rural oriented curricula have been effective in placing their graduates in rural and underserved areas; and

WHEREAS, Health practitioners who receive training in rural areas or areas with a high concentration of an underserved population are more likely to return to these communities to practice; and

WHEREAS, Primary health care professionals often have the greatest impact on improving and maintaining the health of the greatest numbers of people and primary care is more cost-effective than delayed hospitalization; now, therefore, be it

RESOLVED BY THE GENERAL ASSEMBLY OF MARYLAND, That all institutions that train health professionals should have seek academically appropriate affiliations with free standing community-based practices organizations to encourage their exposure to underserved populations and remote rural communities; and be it further

RESOLVED, That health professions programs funded in part by the State should give consideration to qualified applicants from rural areas and racial and ethnic minorities in the admissions process as a method of increasing the pool of health professionals in rural communities and underserved populations; and be it further

RESOLVED, That institutions that train health professionals should explore the development of decentralized residency programs, including long term placement in rural communities under supervision; and be it further

RESOLVED, That State-funded health professions programs and institutions that demonstrate substantial effectiveness in training rural doctors, underserved population doctors, <u>nurse practitioners</u>, and allied health professionals who practice in underserved and/or rural communities should be given priority in State health professions education funding at the graduate and undergraduate level; and be it further

RESOLVED, That institutions that train health professionals, particularly those having graduate programs, as well as graduate nursing programs in mental health, gerontology, and primary care should as appropriate, pursue the development of service linkages with rural providers to improve health care in underserved populations or rural communities, and specialized health services that are not locally available should be developed by local providers; and be it further

RESOLVED, That a copy of this Resolution be forwarded by the Department of Legislative Reference to the Honorable William Donald Schaefer, Governor of Maryland; the Honorable Thomas V. Mike Miller, Jr., President of the Senate of Maryland; and the Honorable R. Clayton Mitchell, Jr., Speaker of the House of Delegates; the Dean of the University of Maryland School of Medicine; and the Dean of The Johns Hopkins School of Medicine.

Signed May 27, 1993.